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APPLICANTS

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** CONTINUING DATA ****

none *de*

** FOREIGN APPLICATIONS ****

none *de*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/17/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 28	TOTAL CLAIMS 25-4	INDEPENDENT CLAIMS 4-2
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	Allowance <i>[Signature]</i> Initials			

ADDRESS

27777

TITLE

ASSEMBLY TOOL FOR MODULAR IMPLANTS AND ASSOCIATED METHOD

FILING FEE RECEIVED 924	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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